

SECTION A. PREGNANCY HISTORY

First, I have some questions about your background.

A1. What is your date of birth?

|_|_|/|_|_|/|_|_|
MONTH DAY YEAR

A2. What is your current age? (RECORD HERE AND ON CALENDAR.)

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AGE

BOX A-1

This is a calendar on which I will record certain events during the course of the interview. Most people find the calendar helps in remembering the order of events in the past. First I will record your month and year of birth on the calendar.

RECORD "DOB" ON CALENDAR.

Some events are more easily remembered by age than by the year of occurrence. So I will next attach this age strip to the calendar.

LINE UP YEAR OF BIRTH ON CALENDAR WITH "DOB" ON AGE STRIP AND ATTACH TO CALENDAR.

Many questions will be asked about the time period before (REFERENCE DATE). Let's also mark that date on the calendar.

RECORD "REF" ON CALENDAR.

A3. Before (REFERENCE DATE), how many times have you been pregnant? This includes live births, stillbirths, miscarriages, abortions, tubal and other ectopic pregnancies. Be sure to count your current pregnancy if you were pregnant on or before (REFERENCE DATE).

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PREGNANCIES
NONE 00 (A14)

Now I will ask some detailed questions about (each of your pregnancies/that pregnancy). (ASK A4-A10 FOR ONE PREGNANCY BEFORE ASKING ABOUT THE NEXT.)

	1ST PREGNANCY	2ND PREGNANCY
A4. Was your (1st, 2nd, etc.) pregnancy a live birth, stillbirth, miscarriage, abortion, or ectopic pregnancy?		
<div>SHOW CARD A4</div> <div>A. SINGLE LIVE BIRTH.....</div> <div>B. MULTIPLE BIRTH, ANY LIVING.....</div> <div>C. MULTIPLE BIRTH, NONE LIVING</div> <div>D. STILLBIRTH</div> <div>E. MISCARRIAGE</div> <div>F. INDUCED ABORTION.....</div> <div>G. ECTOPIC/TUBAL.....</div> <div>H. CURRENTLY PREGNANT.....</div> <div>I. OTHER (SPECIFY)</div>	<div>..... 01 (A6)</div> <div>..... 02 (A6)</div> <div>..... 03 (A6)</div> <div>..... 04 (A6)</div> <div>..... 05</div> <div>..... 06</div> <div>..... 07 (A7)</div> <div>..... 08 (NEXT OR A11)</div> <div>..... 96 (A7)</div>	<div>..... 01 (A6)</div> <div>..... 02 (A6)</div> <div>..... 03 (A6)</div> <div>..... 04 (A6)</div> <div>..... 05</div> <div>..... 06</div> <div>..... 07 (A7)</div> <div>..... 08 (NEXT OR A11)</div> <div>..... 96 (A7)</div>
A5. Was this pregnancy confirmed by a doctor, by a home test, or by some other method? (CIRCLE ALL THAT APPLY)		
<div>DOCTOR/LAB TEST</div> <div>HOME TEST</div> <div>OTHER METHOD (SPECIFY)</div> <div>NOT CONFIRMED.....</div>	<div>..... 1 (A7)</div> <div>..... 2 (A7)</div> <div>..... 6 (A7)</div> <div>..... 0 (A7)</div>	<div>..... 1 (A7)</div> <div>..... 2 (A7)</div> <div>..... 6 (A7)</div> <div>..... 0 (A7)</div>
A6. Was the baby a boy or a girl? (MULTIPLE BIRTH WORDS: How many boys did you have? How many girls did you have?)	<div>.....</div> <div>BOYS</div> <div>.....</div> <div>GIRLS</div>	<div>.....</div> <div>BOYS</div> <div>.....</div> <div>GIRLS</div>
A7. How many weeks or months did that pregnancy last?	<div>.....</div> <div>WEEKS</div> <div>OR</div> <div>.....</div> <div>MONTHS</div>	<div>.....</div> <div>WEEKS</div> <div>OR</div> <div>.....</div> <div>MONTHS</div>
A8. On what date did that pregnancy end?	<div>...../...../.....</div> <div>MO DAY YR</div> <div>PUT PG. ON CAL</div>	<div>...../...../.....</div> <div>MO DAY YR</div> <div>PUT PG. ON CAL</div>
<div>USING A7 AND A8, PUT "PG" ON CALENDAR FOR EACH MONTH OF THAT PREG.</div>		

BOX A-2

CHECK A4. IF LIVE BIRTH, CONTINUE. (A4=1 OR 2)
OTHERWISE, GO TO NEXT PREGNANCY OR A11.

3RD PREGNANCY	4TH PREGNANCY	5TH PREGNANCY	6TH PREGNANCY
<div>..... 01 (A6)</div> <div>..... 02 (A6)</div> <div>..... 03 (A6)</div> <div>..... 04 (A6)</div> <div>..... 05</div> <div>..... 06</div> <div>..... 07 (A7)</div> <div>..... 08 (NEXT OR A11)</div> <div>..... 96 (A7)</div>	<div>..... 01 (A6)</div> <div>..... 02 (A6)</div> <div>..... 03 (A6)</div> <div>..... 04 (A6)</div> <div>..... 05</div> <div>..... 06</div> <div>..... 07 (A7)</div> <div>..... 08 (NEXT OR A11)</div> <div>..... 96 (A7)</div>	<div>..... 01 (A6)</div> <div>..... 02 (A6)</div> <div>..... 03 (A6)</div> <div>..... 04 (A6)</div> <div>..... 05</div> <div>..... 06</div> <div>..... 07 (A7)</div> <div>..... 08 (NEXT OR A11)</div> <div>..... 96 (A7)</div>	<div>..... 01 (A6)</div> <div>..... 02 (A6)</div> <div>..... 03 (A6)</div> <div>..... 04 (A6)</div> <div>..... 05</div> <div>..... 06</div> <div>..... 07 (A7)</div> <div>..... 08 (NEXT OR A11)</div> <div>..... 96 (A7)</div>
<div>..... 1 (A7)</div> <div>..... 2 (A7)</div> <div>..... 6 (A7)</div> <div>..... 0 (A7)</div>	<div>..... 1 (A7)</div> <div>..... 2 (A7)</div> <div>..... 6 (A7)</div> <div>..... 0 (A7)</div>	<div>..... 1 (A7)</div> <div>..... 2 (A7)</div> <div>..... 6 (A7)</div> <div>..... 0 (A7)</div>	<div>..... 1 (A7)</div> <div>..... 2 (A7)</div> <div>..... 6 (A7)</div> <div>..... 0 (A7)</div>
<div>..... BOYS</div> <div>..... GIRLS</div>	<div>..... BOYS</div> <div>..... GIRLS</div>	<div>..... BOYS</div> <div>..... GIRLS</div>	<div>..... BOYS</div> <div>..... GIRLS</div>
<div>..... WEEKS OR MONTHS</div>	<div>..... WEEKS OR MONTHS</div>	<div>..... WEEKS OR MONTHS</div>	<div>..... WEEKS OR MONTHS</div>
<div>...../...../..... MO DAY YR</div> <div>PUT PG. ON CAL</div>	<div>...../...../..... MO DAY YR</div> <div>PUT PG. ON CAL</div>	<div>...../...../..... MO DAY YR</div> <div>PUT PG. ON CAL</div>	<div>...../...../..... MO DAY YR</div> <div>PUT PG. ON CAL</div>

BOX A-2

CHECK A4. IF LIVE BIRTH, CONTINUE. (A7=4=1 OR 2)
OTHERWISE, GO TO NEXT PREGNANCY OR A11.

	1ST PREGNANCY	2ND PREGNANCY
A9. Did you ever breast feed (this baby/any of these babies)? YES NO..... 1 2 (NEXT PREGNANCY OR A11) 1 2 (NEXT PREGNANCY OR A11)
A10. How old (was the baby/were the babies) when you stopped breastfeeding (him/her/them) altogether? <div>PUT "N" ON CALENDAR FOR EACH MONTH OF NURSING.</div>	<div>PUT N ON CAL</div> <div>WEEKS OR MONTHS</div> STILL NURSING 95 (NEXT PREGNANCY OR A11)	<div>PUT N ON CAL</div> <div>WEEKS OR MONTHS</div> STILL NURSING 95 (NEXT PREGNANCY OR A11)

3RD PREGNANCY	4TH PREGNANCY	5TH PREGNANCY	6TH PREGNANCY
..... 1 2 (NEXT PREGNANCY OR A11) 1 2 (NEXT PREGNANCY OR A11) 1 2 (NEXT PREGNANCY OR A11) 1 2 (NEXT PREGNANCY OR A11)
<div>PUT N ON CAL</div> <div>WEEKS OR MONTHS</div> <div>STILL NURSING 95</div> <div>(NEXT PREGNANCY OR A11)</div>	<div>PUT N ON CAL</div> <div>WEEKS OR MONTHS</div> <div>STILL NURSING 95</div> <div>(NEXT PREGNANCY OR A11)</div>	<div>PUT N ON CAL</div> <div>WEEKS OR MONTHS</div> <div>STILL NURSING 95</div> <div>(NEXT PREGNANCY OR A11)</div>	<div>PUT N ON CAL</div> <div>WEEKS OR MONTHS</div> <div>STILL NURSING 95</div> <div>(NEXT PREGNANCY OR A11)</div>

A11. During any of your pregnancies, did you ever develop . . .	A12. Which pregnancies were they?	A13. During your (PREGNANCY FROM A12d), what type of complications did you have?
a. Hypertension or high blood pressure? YES 1 NO 2 (A11b)	a. _____ (PREGNANCY #) b. _____ (PREGNANCY #) c. _____ (PREGNANCY #) d. _____ (PREGNANCY #)	
b. Toxemia or pre-eclampsia? YES 1 NO 2 (A11c)	a. _____ (PREGNANCY #) b. _____ (PREGNANCY #) c. _____ (PREGNANCY #) d. _____ (PREGNANCY #)	
c. Diabetes or high blood sugar? YES 1 NO 2 (A11d)	a. _____ (PREGNANCY #) b. _____ (PREGNANCY #) c. _____ (PREGNANCY #) d. _____ (PREGNANCY #)	
d. Any other pregnancy-related complications? YES 1 NO 2 (A14)	a. _____ (PREGNANCY #) b. _____ (PREGNANCY #) c. _____ (PREGNANCY #) d. _____ (PREGNANCY #)	<div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div>

A14. Are you currently ...

Married,	1
Living as married,	2
Widowed,	3
Separated,	4
Divorced, or	5
Single, never married or lived as married?	6 (SECTION B)

A15. How many times have you been married or lived as married?

|_|_|
TIMES

A16. In what month and year were you (first/next) married or living as married? (ASK FOR EACH TIME.)

	<u>MONTH</u>	<u>YEAR</u>
FIRST:	_ _	_ _
SECOND:	_ _	_ _
THIRD:	_ _	_ _
FOURTH:	_ _	_ _
FIFTH:	_ _	_ _

BOX A-3

READ: Now I will record on the calendar an "M" for the (date/each of the dates) that you have just given me.

RECORD "M" IN MO/YR ON THE CALENDAR WHEN EACH MARRIAGE OR LIVING AS MARRIED BEGAN.